

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

LIBERTARIAN NATIONAL COMMITTEE, INC.

ADDRESS (number and street) ▼

1444 DUKE STREET

☐ Check if different than previously reported. (ACC)

ALEXANDRIA

VA

22314

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00255695

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☒ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

01

01

2016

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

01

31

2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. Timothy R. Hagan

Signature of Treasurer

Mr. Timothy R. Hagan

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

02

18

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

LIBERTARIAN NATIONAL COMMITTEE, INC.

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		<input type="text" value="71383.25"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="71383.25"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="129364.06"/>	<input type="text" value="129364.06"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="200747.31"/>	<input type="text" value="200747.31"/>
7. Total Disbursements (from Line 31)	<input type="text" value="95526.81"/>	<input type="text" value="95526.81"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<input type="text" value="105220.50"/>	<input type="text" value="105220.50"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

LIBERTARIAN NATIONAL COMMITTEE, INC.

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	1	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	70465.34	70465.34
(ii) Unitemized	58798.72	58798.72
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ►	129264.06	129264.06
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	129264.06	129264.06
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	100.00	100.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	129364.06	129364.06
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	129364.06	129364.06

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	95526.81	95526.81
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	95526.81	95526.81
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	95526.81	95526.81
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	95526.81	95526.81

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	129264.06	129264.06
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	129264.06	129264.06
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	95526.81	95526.81
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	95526.81	95526.81

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFH'G7 <98I @ 'CF' +H9A-N5 H-CB

Form/Schedule: F3XN

Transaction ID :

The Committee wishes to disclose the following: 1) No expenditures designated on Schedule B supporting Line 21b were made on behalf of any specifically identified federal candidate(s). 2) The Libertarian National Committee (LNC) requests address, employer, and occupation information from all contributors whose yearly aggregate contributions exceed \$200.00 and informs them of the requirement of complying with 11 CFR 104.7(b)(1). In the event that the information is not supplied as a result of the initial request, Committee makes a subsequent attempt to collect the information by mail, email, or telephone contact within 30 days of the initial contribution. This 'follow up' request a) clearly asks for the missing information without requesting a contribution, b) informs the contributor of the requirements for reporting such information under federal law, and c) is enclosed with a pre-addressed envelope when sent by postal mail. If the information is submitted after the initial monthly report is filed, the contributor master file is updated and the information is updated in memo entries filed with the next regularly scheduled report. The Committee also makes periodic requests during the year for all contributors to update their contact information and for contributors whose yearly contributions aggregate to more than \$200 to update their Employer/Occupation information.

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 73
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Wendy A. Adams

Mailing Address 121 Rosa Ave

City	State	Zip Code
Metairie	LA	70005-3413

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

Political Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	02	/	2016

Transaction ID : SA11AI.42775

Amount of Each Receipt this Period

349.00

Contribution

Full Name (Last, First, Middle Initial)

B. Sam Allen

Mailing Address 209 Pueblo Solano Rd NW

City	State	Zip Code
Albuquerque	NM	87107-6129

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Unemployed

Unemployed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	14	/	2016

Transaction ID : SA11AI.42787

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mr Samuel R. Banter

Mailing Address 1113 N 8th St

City	State	Zip Code
Leavenworth	KS	66048-1385

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

U.S. Army

Soldier

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	02	/	2016

Transaction ID : SA11AI.42877

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

849.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER:
 (check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Paul A. Bassham

Mailing Address 4726 E 86th St

City

Cleveland

State

OH

Zip Code

44125-1332

FEC ID number of contributing
federal political committee.

C

Name of Employer

Giant Eagle

Occupation

Customer Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		1	9		2	0	1	6		

Transaction ID : SA11AI.42899

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

B. William Bean

Mailing Address 26 N Hawthorne Ln

City

Indianapolis

State

IN

Zip Code

46219-5613

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		0	2		2	0	1	6		

Transaction ID : SA11AI.42910

Amount of Each Receipt this Period

349.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mr. Robert H. Biggadike

Mailing Address 3626 Cottonwood Cir

City

West Covina

State

CA

Zip Code

91792-2778

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		2	0		2	0	1	6		

Transaction ID : SA11AI.42952

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

849.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER:
 (check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Ms Juanita W. Billings

Mailing Address 10819 Ann Davis Dr

City

Fredericksburg

State

VA

Zip Code

22408-1972

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

QinetiQ-NA

Occupation

Systems Analyst

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

349.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		07		2016

Transaction ID : SA11AI.42953

Amount of Each Receipt this Period

349.00

Contribution

Full Name (Last, First, Middle Initial)

B. Mr. Michael Binroth

Mailing Address 4884 Hawkins Rd

City

Jackson

State

MI

Zip Code

49201-9603

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

GH Binroth

Occupation

General Manager

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		20		2016

Transaction ID : SA11AI.42957

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

C. Elizabeth C. Brierly

Mailing Address PO Box 611021

City

San Jose

State

CA

Zip Code

95161-1021

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

Self-Employed

Occupation

Consultant

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

399.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		02		2016

Transaction ID : SA11AI.43026

Amount of Each Receipt this Period

399.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

998.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 73
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Mr. Robert F. Broda

Mailing Address 905 Garfield Ave

City

Lansing

State

MI

Zip Code

48917-9249

FEC ID number of contributing
federal political committee.

C

Name of Employer

Tony M's

Occupation

Bartender

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

399.00

Date of Receipt

01 / 02 / 2016

Transaction ID : SA11AI.43038

Amount of Each Receipt this Period

399.00

Contribution

Full Name (Last, First, Middle Initial)

B. Mr. Christopher M. Brookover

Mailing Address 132 Fortnightly Blvd

City

Herndon

State

VA

Zip Code

20170-3754

FEC ID number of contributing
federal political committee.

C

Name of Employer

ETG, Inc.

Occupation

Sr. Tech Analysis

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1639.00

Date of Receipt

01 / 02 / 2016

Transaction ID : SA11AI.43040

Amount of Each Receipt this Period

1500.00

Contribution

Full Name (Last, First, Middle Initial)

C. Gary Brooks

Mailing Address 110 E Main St

City

Iron Mountain

State

MI

Zip Code

49801-2208

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Electrician

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 06 / 2016

Transaction ID : SA11AI.43042

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2149.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Theodore W. Brown

Mailing Address 949 N Hill Ave

City

Pasadena

State

CA

Zip Code

91104-3043

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.00

Date of Receipt

01 / 02 / 2016

Transaction ID : SA11AI.43057

Amount of Each Receipt this Period

399.00

Contribution

Full Name (Last, First, Middle Initial)

B. Philip Budzik

Mailing Address 1101 E Paramount Dr

City

Pueblo

State

CO

Zip Code

81007-2141

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 26 / 2016

Transaction ID : SA11AI.43073

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

C. Kelly Bunkley

Mailing Address 4450 Ridgmont Dr Apt 622

City

Abilene

State

TX

Zip Code

79606-2767

FEC ID number of contributing
federal political committee.

C

Name of Employer

Buckley Electric Management

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

01 / 11 / 2016

Transaction ID : SA11AI.43080

Amount of Each Receipt this Period

500.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1149.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 73
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Jeff Carlson

Mailing Address 49 Magnolia Dr

City State Zip Code
 Rocky Point NY 11778-9183

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

HVACR Mechanic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 29 / 2016

Transaction ID : SA11AI.43122

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

B. Dr. Larry Carlson

Mailing Address 5689 Cabot Dr

City State Zip Code
 Oakland CA 94611-2247

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Investment Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 12 / 2016

Transaction ID : SA11AI.43123

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mr. Wayne Clark

Mailing Address 515 Fall River Rd

City State Zip Code
 Houston TX 77024-5613

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

01 / 04 / 2016

Transaction ID : SA11AI.43164

Amount of Each Receipt this Period

1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

1500.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 73

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Mr. William Charles Collins

Mailing Address 505 Mallory Ct

City

El Paso

State

TX

Zip Code

79912-4228

FEC ID number of contributing
federal political committee.

C

Name of Employer

EPIPG/Self

Occupation

Healthcare Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

559.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		2	0		2	0	1	6		

Transaction ID : SA11AI.43192

Amount of Each Receipt this Period

459.00

Contribution

Full Name (Last, First, Middle Initial)

B. Curtis A. Cook

Mailing Address 19051 86th Ave NE

City

Bothell

State

WA

Zip Code

98011-2111

FEC ID number of contributing
federal political committee.

C

Name of Employer

Peak Systems, Inc.

Occupation

Technician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		0	2		2	0	1	6		

Transaction ID : SA11AI.43204

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mr. Roger J. Cooper

Mailing Address 25 Wood Ave

City

Albertson

State

NY

Zip Code

11507-1611

FEC ID number of contributing
federal political committee.

C

Name of Employer

Spectronic

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		0	7		2	0	1	6		

Transaction ID : SA11AI.43214

Amount of Each Receipt this Period

300.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1009.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Richard Creamer

Mailing Address 7871 Highway 87 N

City
Milton

State
FL

Zip Code
32570-9027

FEC ID number of contributing
federal political committee.

C

Name of Employer

Andromeda Systems, Inc.

Occupation

Acquisition Logistics Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.00

Date of Receipt

01 / 05 / 2016

Transaction ID : SA11AI.43234

Amount of Each Receipt this Period

399.00

Contribution

Full Name (Last, First, Middle Initial)

B. Anthony C. Crikis

Mailing Address 8537 Acree Rd

City

Jacksonville

State

FL

Zip Code

32219-1111

FEC ID number of contributing
federal political committee.

C

Name of Employer

CSX Transportation

Occupation

Communications Technician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 26 / 2016

Transaction ID : SA11AI.43236

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

c. Mr. William Dargel

Mailing Address 100 W Joy Rd

City

Ann Arbor

State

MI

Zip Code

48105-9610

FEC ID number of contributing
federal political committee.

C

Name of Employer

Shoshana Technologies

Occupation

Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

01 / 06 / 2016

Transaction ID : SA11AI.43268

Amount of Each Receipt this Period

300.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

949.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. David DeCorte

Mailing Address 19200 Fairfield Dr

City

Fairhope

State

AL

Zip Code

36532-7084

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Engineer

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

399.00

Date of Receipt

01 / 02 / 2016

Transaction ID : SA11AI.43285

Amount of Each Receipt this Period

399.00

Contribution

Full Name (Last, First, Middle Initial)

B. Joseph Deslauriers

Mailing Address 1337 Emerald Bay Dr

City

Destin

State

FL

Zip Code

32541-3787

FEC ID number of contributing
federal political committee.

C

Name of Employer

DoD

Occupation

Explosive Ordnance Disposal Support Sp

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 21 / 2016

Transaction ID : SA11AI.43299

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mr. Drew Devitt

Mailing Address 12 N Bryn Mawr Pl

City

Media

State

PA

Zip Code

19063-5336

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 06 / 2016

Transaction ID : SA11AI.43302

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

899.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 73

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Valerie Durham

Mailing Address 9108 Willow Pond Ln

City State Zip Code
 Potomac MD 20854-2410

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.00

Date of Receipt

01 / 13 / 2016

Transaction ID : SA11AI.43362

Amount of Each Receipt this Period

318.00

Contribution

Full Name (Last, First, Middle Initial)

B. Richard J. Edgar

Mailing Address 8 Arneytown Hornerstown Rd

City State Zip Code
 Cream Ridge NJ 08514-1805

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.00

Date of Receipt

01 / 02 / 2016

Transaction ID : SA11AI.43372

Amount of Each Receipt this Period

139.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mr. Abel Feinstein

Mailing Address 20029 Covington Pkwy

City State Zip Code
 Southfield MI 48076-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 19 / 2016

Transaction ID : SA11AI.43418

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

707.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

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 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Joyce Franceschini

Mailing Address 411 Matt Robinson Ln

City	State	Zip Code
Point Pleasant Boro	NJ	08742-2172

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Information Requested

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	02	/	2016

Transaction ID : SA11AI.43461

Amount of Each Receipt this Period

399.00

Contribution

Full Name (Last, First, Middle Initial)

B. Louis F. Fries III

Mailing Address 2786 Westminster Rd

City	State	Zip Code
Ellicott City	MD	21043-3595

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

NOVAVAX, Inc.

Clinical Research

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	11	/	2016

Transaction ID : SA11AI.43476

Amount of Each Receipt this Period

500.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mr. Frederick J. Graboske

Mailing Address 101 N Van Buren St

City	State	Zip Code
Rockville	MD	20850-1860

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	27	/	2016

Transaction ID : SA11AI.43562

Amount of Each Receipt this Period

500.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1399.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Kevin L. Gulbranson

Mailing Address 21079 E Mineral Dr

City State Zip Code
Aurora CO 80016-1927

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 02 2016

Transaction ID : SA11AI.43617

Amount of Each Receipt this Period

399.00

Contribution

Full Name (Last, First, Middle Initial)

B. Kevin L. Gulbranson

Mailing Address 21079 E Mineral Dr

City State Zip Code
Aurora CO 80016-1927

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

798.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 02 2016

Transaction ID : SA11AI.43618

Amount of Each Receipt this Period

399.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mr. William Hajdu

Mailing Address 2331 Russell St

City State Zip Code
Berkeley CA 94705-1988

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

389.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 11 2016

Transaction ID : SA11AI.43631

Amount of Each Receipt this Period

389.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

1187.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Mary Haskett

Mailing Address 5604-B Creek Btm

City State Zip Code
Austin TX 78731-4602

FEC ID number of contributing
federal political committee.

C

Name of Employer

Tactical Info Systems

Occupation

Co Founder

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 20 / 2016

Transaction ID : SA11AI.43671

Amount of Each Receipt this Period

289.00

Contribution

Full Name (Last, First, Middle Initial)

B. Steven E. Haskett

Mailing Address 5604-B Creek Btm

City State Zip Code
Austin TX 78731-4602

FEC ID number of contributing
federal political committee.

C

Name of Employer

Tactical Information Systems

Occupation

Programmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 20 / 2016

Transaction ID : SA11AI.43672

Amount of Each Receipt this Period

289.00

Contribution

Full Name (Last, First, Middle Initial)

C. Jay Heizer

Mailing Address PO Box 5071

City State Zip Code
Center Point TX 78010-5071

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Freedom Advocate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 27 / 2016

Transaction ID : SA11AI.43696

Amount of Each Receipt this Period

500.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1078.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
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 (check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Gregory T. Hertzsch

Mailing Address 120 Hills Dr

City

Clarksville

State

IN

Zip Code

47129-2539

FEC ID number of contributing
federal political committee.

C

Name of Employer

Vivid Impact, Inc.

Occupation

Shipping Assistant

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

399.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 01 / 02 / 2016

Transaction ID : SA11AI.43714

Amount of Each Receipt this Period

399.00

Contribution

Full Name (Last, First, Middle Initial)

B. Gregory T. Hertzsch

Mailing Address 120 Hills Dr

City

Clarksville

State

IN

Zip Code

47129-2539

FEC ID number of contributing
federal political committee.

C

Name of Employer

Vivid Impact, Inc.

Occupation

Shipping Assistant

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

409.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 01 / 02 / 2016

Transaction ID : SA11AI.43715

Amount of Each Receipt this Period

10.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mr. Jim E. Higgins

Mailing Address 11944 Craig View Dr

City

Saint Louis

State

MO

Zip Code

63146-5428

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 01 / 20 / 2016

Transaction ID : SA11AI.43725

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

659.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Mr. Duane M Horton

Mailing Address PO Box 4413

City

Middletown

State

RI

Zip Code

02842-0413

FEC ID number of contributing
federal political committee.

C

Name of Employer

Uncle Sam

Occupation

taxpayer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 20 / 2016

Transaction ID : SA11AI.43773

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

B. Ms. Barbara J. Howe

Mailing Address 5046 Tar Hill Dr

City

Oxford

State

NC

Zip Code

27565-5416

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.00

Date of Receipt

01 / 02 / 2016

Transaction ID : SA11AI.43786

Amount of Each Receipt this Period

349.00

Contribution

Full Name (Last, First, Middle Initial)

C. Ms. Barbara J. Howe

Mailing Address 5046 Tar Hill Dr

City

Oxford

State

NC

Zip Code

27565-5416

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

698.00

Date of Receipt

01 / 02 / 2016

Transaction ID : SA11AI.43787

Amount of Each Receipt this Period

349.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

948.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 22 OF 73
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Ms. Barbara J. Howe

Mailing Address 5046 Tar Hill Dr

City	State	Zip Code
Oxford	NC	27565-5416

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Information Requested

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

728.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		02		2016

Transaction ID : SA11AI.43788

Amount of Each Receipt this Period

30.00

Contribution

Full Name (Last, First, Middle Initial)

B. Donald Igo

Mailing Address 1806 N 153rd Avenue Cir

City	State	Zip Code
Omaha	NE	68154-4112

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Information Requested

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		26		2016

Transaction ID : SA11AI.43825

Amount of Each Receipt this Period

459.00

Contribution

Full Name (Last, First, Middle Initial)

C. Irving Ingraham Jr.

Mailing Address 115 Federal St

City	State	Zip Code
Salem	MA	01970-3241

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

North Shore Physicians Group

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		20		2016

Transaction ID : SA11AI.43831

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

739.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. John Karr

Mailing Address 215 E Allen St

City

Philadelphia

State

PA

Zip Code

19125-4103

FEC ID number of contributing
federal political committee.

C

Name of Employer

American College of Physicians

Occupation

Web Administrator

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

349.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 02 / 2016

Transaction ID : SA11AI.43899

Amount of Each Receipt this Period

349.00

Contribution

Full Name (Last, First, Middle Initial)

B. Mr. Daryl A. Kearns

Mailing Address 9251 Cumberland Rd SW

City

Bowerston

State

OH

Zip Code

44695-9640

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 04 / 2016

Transaction ID : SA11AI.43902

Amount of Each Receipt this Period

300.00

Contribution

Full Name (Last, First, Middle Initial)

C. William Kelsey

Mailing Address 1405 Alegria Rd

City

Austin

State

TX

Zip Code

78757-2934

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Pilot

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

399.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 02 / 2016

Transaction ID : SA11AI.43910

Amount of Each Receipt this Period

399.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

1048.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Mr. Michael Kielsky

Mailing Address 1127 W 10th Pl

City State Zip Code
Mesa AZ 85201-3107

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kielsky Rike PLLC

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 02 / 2016

Transaction ID : SA11AI.43923

Amount of Each Receipt this Period

399.00

Contribution

Full Name (Last, First, Middle Initial)

B. Mr. Michael Kielsky

Mailing Address 1127 W 10th Pl

City State Zip Code
Mesa AZ 85201-3107

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kielsky Rike PLLC

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

424.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 02 / 2016

Transaction ID : SA11AI.43924

Amount of Each Receipt this Period

25.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mr. Carl A. Koszycki

Mailing Address 4309 N Richmond St Apt 1

City State Zip Code
Chicago IL 60618-1469

FEC ID number of contributing
federal political committee.

C

Name of Employer

EDCO Drapery Workroom

Occupation

Business Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 26 / 2016

Transaction ID : SA11AI.43973

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

674.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 25 OF 73
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Karla Kramer

Mailing Address 2516 160th Rd

City

Guthrie Center

State

IA

Zip Code

50115-8519

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

289.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	6		2	0	1	6

Transaction ID : SA11AI.43978

Amount of Each Receipt this Period

289.00

Contribution

Full Name (Last, First, Middle Initial)

B. Karla Kramer

Mailing Address 2516 160th Rd

City

Guthrie Center

State

IA

Zip Code

50115-8519

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

314.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	6		2	0	1	6

Transaction ID : SA11AI.43979

Amount of Each Receipt this Period

25.00

Contribution

Full Name (Last, First, Middle Initial)

C. Dr. James W. Lark III

Mailing Address 6055 Buck Ridge Rd

City

Earlsville

State

VA

Zip Code

22936-9311

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Virginia

Occupation

Professor

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

349.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	2		2	0	1	6

Transaction ID : SA11AI.44010

Amount of Each Receipt this Period

349.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

663.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Dr. James W. Lark III

Mailing Address 6055 Buck Ridge Rd

City
Earlsville

State
VA

Zip Code
22936-9311

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of Virginia

Occupation
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 02 / 2016

Transaction ID : SA11AI.44011

Amount of Each Receipt this Period

15.00

Contribution

Full Name (Last, First, Middle Initial)

B. Mr. Michael G. Lewis

Mailing Address 1608 Yale Ave

City

Richmond Heights

State

MO

Zip Code

63117-2342

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 02 / 2016

Transaction ID : SA11AI.44073

Amount of Each Receipt this Period

399.00

Contribution

Full Name (Last, First, Middle Initial)

C. Ruth E. Lewis

Mailing Address 1608 Yale Ave

City

Richmond Heights

State

MO

Zip Code

63117-2342

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 28 / 2016

Transaction ID : SA11AI.44077

Amount of Each Receipt this Period

399.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

813.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Christopher Mabie

Mailing Address 1524 Carlton Ave NE

City

Grand Rapids

State

MI

Zip Code

49505-5410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	2		2	0	1	6

Transaction ID : SA11AI.44114

Amount of Each Receipt this Period

399.00

Contribution

Full Name (Last, First, Middle Initial)

B. Mr. John Jude McCurry

Mailing Address 360 S Main St

City

Fowler

State

MI

Zip Code

48835-9151

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bimbo Bakery

Occupation

Route Driver

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	2		2	0	1	6

Transaction ID : SA11AI.44190

Amount of Each Receipt this Period

139.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mr. Henry Mendenhall

Mailing Address 2 W Parsonage Way

City

Manalapan

State

NJ

Zip Code

07726-7903

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lockheed Martin

Occupation

Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	1		2	0	1	6

Transaction ID : SA11AI.44225

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

788.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Mark A. Miller

Mailing Address 2609 Indian Creek Rd

City

Austin

State

TX

Zip Code

78734-2826

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.00

Date of Receipt

01 / 02 / 2016

Transaction ID : SA11AI.44241

Amount of Each Receipt this Period

399.00

Contribution

Full Name (Last, First, Middle Initial)

B. Mark A. Miller

Mailing Address 2609 Indian Creek Rd

City

Austin

State

TX

Zip Code

78734-2826

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

449.00

Date of Receipt

01 / 02 / 2016

Transaction ID : SA11AI.44242

Amount of Each Receipt this Period

50.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mark A. Miller

Mailing Address 2609 Indian Creek Rd

City

Austin

State

TX

Zip Code

78734-2826

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

848.00

Date of Receipt

01 / 19 / 2016

Transaction ID : SA11AI.44243

Amount of Each Receipt this Period

399.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

848.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Roy Minet

Mailing Address 623 Skyler Dr

City

Mount Joy

State

PA

Zip Code

17552-5003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 14 / 2016

Transaction ID : SA11AI.44251

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

B. Melanie Mullenax

Mailing Address 112 E Pointe Dr

City

Starkville

State

MS

Zip Code

39759-3577

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 26 / 2016

Transaction ID : SA11AI.44297

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

C. Gregory W. Noland

Mailing Address 836 Charlene Ln

City

Anderson

State

IN

Zip Code

46011-1809

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ford Meter Box

Occupation

Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.00

Date of Receipt

01 / 02 / 2016

Transaction ID : SA11AI.44340

Amount of Each Receipt this Period

399.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

899.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Sean T. O'Toole

Mailing Address 3425 Gladstone Blvd

City

Kansas City

State

MO

Zip Code

64123-1112

FEC ID number of contributing
federal political committee.

C

Name of Employer

Phoenix Web Group, Inc.

Occupation

Softwre Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 02 / 2016

Transaction ID : SA11AI.44384

Amount of Each Receipt this Period

349.00

Contribution

Full Name (Last, First, Middle Initial)

B. Ms. Pamela E. Potter

Mailing Address 538 Spring Place Rd NE

City

White

State

GA

Zip Code

30184-2232

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 02 / 2016

Transaction ID : SA11AI.44475

Amount of Each Receipt this Period

500.00

Contribution

Full Name (Last, First, Middle Initial)

C. Carlos Proano

Mailing Address 103 Revere Rd

City

Monterey

State

CA

Zip Code

93940-6211

FEC ID number of contributing
federal political committee.

C

Name of Employer

Michaels Management Svc

Occupation

Property Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 08 / 2016

Transaction ID : SA11AI.44494

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1099.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

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PAGE 31 OF 73

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Ryan Rapoza

Mailing Address 124 Bonaventure Dr

City State Zip Code
Lagrange GA 30241-1306

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aerotron AirPower, Inc.

Occupation
Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 08 / 2016

Transaction ID : SA11AI.44517

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

B. Mr. William B. Redpath

Mailing Address 827 Anthony Ct SE

City State Zip Code
Leesburg VA 20175-5629

FEC ID number of contributing
federal political committee.

C

Name of Employer
BIA Advisory Services, LLC

Occupation
Financial Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.34

Date of Receipt

01 / 02 / 2016

Transaction ID : SA11AI.44526

Amount of Each Receipt this Period

208.34

Contribution

Full Name (Last, First, Middle Initial)

C. Dr. Gil Robinson

Mailing Address 5150 Broadway St # 610

City State Zip Code
San Antonio TX 78209-5710

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 06 / 2016

Transaction ID : SA11AI.44563

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

708.34

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
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 (check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Jack Robinson Jr.

Mailing Address 14 Torrey Pine Ct

City	State	Zip Code
Spartanburg	SC	29306-6641

FEC ID number of contributing federal political committee.

C

Name of Employer

Precision Bearing & Machine

Occupation

Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	26	/	2016

Transaction ID : SA11AI.44564

Amount of Each Receipt this Period

750.00

Contribution

Full Name (Last, First, Middle Initial)

B. Jo Ann Roeter

Mailing Address 30 Cranston Ave

City	State	Zip Code
Shelton	CT	06484-5541

FEC ID number of contributing federal political committee.

C

Name of Employer

Alliance Energy, LLC

Occupation

Tax Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	02	/	2016

Transaction ID : SA11AI.44572

Amount of Each Receipt this Period

399.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mr. Michael J. Rollins

Mailing Address PO Box 6303

City	State	Zip Code
Providence	RI	02940-6303

FEC ID number of contributing federal political committee.

C

Name of Employer

Skyworld Interactive

Occupation

Web Designer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	13	/	2016

Transaction ID : SA11AI.44586

Amount of Each Receipt this Period

459.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1608.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 33 OF 73
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Mr. Leslie Rose

Mailing Address 330 S Ocean Blvd Apt 3B

City

Palm Beach

State

FL

Zip Code

33480-4263

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	1		2	0	1	6

Transaction ID : SA11AI.44595

Amount of Each Receipt this Period

3000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Charles Saucier

Mailing Address 42082 Meadow Ln

City

Ponchatoula

State

LA

Zip Code

70454-3062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

399.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	2		2	0	1	6

Transaction ID : SA11AI.44645

Amount of Each Receipt this Period

399.00

Contribution

Full Name (Last, First, Middle Initial)

c. Charles Saucier

Mailing Address 42082 Meadow Ln

City

Ponchatoula

State

LA

Zip Code

70454-3062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

798.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	2		2	0	1	6

Transaction ID : SA11AI.44646

Amount of Each Receipt this Period

399.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

3798.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Charles Saucier

Mailing Address 42082 Meadow Ln

City

Ponchatoula

State

LA

Zip Code

70454-3062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

823.00

Date of Receipt

01 / 11 / 2016

Transaction ID : SA11AI.44647

Amount of Each Receipt this Period

25.00

Contribution

Full Name (Last, First, Middle Initial)

B. David Sgambellone

Mailing Address 889 Forest Ln

City

Hanover

State

MD

Zip Code

21076-1517

FEC ID number of contributing
federal political committee.

C

Name of Employer

DoD

Occupation

Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.00

Date of Receipt

01 / 26 / 2016

Transaction ID : SA11AI.44714

Amount of Each Receipt this Period

459.00

Contribution

Full Name (Last, First, Middle Initial)

C. David Sgambellone

Mailing Address 889 Forest Ln

City

Hanover

State

MD

Zip Code

21076-1517

FEC ID number of contributing
federal political committee.

C

Name of Employer

DoD

Occupation

Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

918.00

Date of Receipt

01 / 26 / 2016

Transaction ID : SA11AI.44715

Amount of Each Receipt this Period

459.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

943.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Mr. Joseph Shaber

Mailing Address C/of John C. Lincoln

3514 E Indian School Rd

City

Phoenix

State

AZ

Zip Code

85018-5115

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sunshine Designs

Occupation

clothing wholesale

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33400.00

Date of Receipt

01 / 29 / 2016

Transaction ID : SA11AI.44716

Amount of Each Receipt this Period

33400.00

Contribution

Full Name (Last, First, Middle Initial)

B. John Sinde

Mailing Address PO Box 217

City

Fairfield

State

CA

Zip Code

94533-0021

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pandamerica Imports, Inc.

Occupation

Vice President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 04 / 2016

Transaction ID : SA11AI.44747

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

C. Jeffrey A. Smith

Mailing Address 9 Regent Dr

City

Ann Arbor

State

MI

Zip Code

48104-1738

FEC ID number of contributing
federal political committee.

C

Name of Employer

U of Michigan

Occupation

Professor

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 06 / 2016

Transaction ID : SA11AI.44770

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

33900.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Dr. Cisse Spragins

Mailing Address 3425 Gladstone Blvd

City

Kansas City

State

MO

Zip Code

64123-1112

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rockwell Lab Ltd.

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.00

Date of Receipt

01 / 02 / 2016

Transaction ID : SA11AI.44810

Amount of Each Receipt this Period

349.00

Contribution

Full Name (Last, First, Middle Initial)

B. Dr. Cisse Spragins

Mailing Address 3425 Gladstone Blvd

City

Kansas City

State

MO

Zip Code

64123-1112

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rockwell Lab Ltd.

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.00

Date of Receipt

01 / 02 / 2016

Transaction ID : SA11AI.44811

Amount of Each Receipt this Period

25.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mr. John Stagliano

Mailing Address 4847 Brewster Dr

City

Tarzana

State

CA

Zip Code

91356-4805

FEC ID number of contributing
federal political committee.

C

Name of Employer

Evil Angel Productions

Occupation

Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

01 / 11 / 2016

Transaction ID : SA11AI.44818

Amount of Each Receipt this Period

2500.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2874.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Mr. Thomas R. Stewart

Mailing Address 2916 County Road 807

City

Cleburne

State

TX

Zip Code

76031-7963

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Merchant

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 04 / 2016

Transaction ID : SA11AI.44843

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

B. Dr. John M. Taylor, MD

Mailing Address 145 Church St

City

Fair Haven

State

NJ

Zip Code

07704-3403

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Surgeon

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

399.00

Date of Receipt

01 / 02 / 2016

Transaction ID : SA11AI.44898

Amount of Each Receipt this Period

399.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mr. Joseph P. Thompson

Mailing Address 7474 E Arkansas Ave Apt 3010

City

Denver

State

CO

Zip Code

80231-2546

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

399.00

Date of Receipt

01 / 02 / 2016

Transaction ID : SA11AI.44922

Amount of Each Receipt this Period

399.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1048.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Mr. Richard Tomasso

Mailing Address 110 English Village Rd Apt 204

City

Manchester

State

NH

Zip Code

03102-2428

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

399.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 02 / 2016

Transaction ID : SA11AI.44944

Amount of Each Receipt this Period

399.00

Contribution

Full Name (Last, First, Middle Initial)

B. Dr. Randall Weissbuch

Mailing Address 1292 Oakglen Ave

City

Arcadia

State

CA

Zip Code

91006-2432

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Physician

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

399.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 02 / 2016

Transaction ID : SA11AI.45040

Amount of Each Receipt this Period

399.00

Contribution

Full Name (Last, First, Middle Initial)

C. Nathan Wilson

Mailing Address 560 Cass Pine Log Rd

City

Rydal

State

GA

Zip Code

30171-1401

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wilson Contracting

Occupation

Owner

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

349.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 02 / 2016

Transaction ID : SA11AI.45107

Amount of Each Receipt this Period

349.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

1147.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Edward B. Wright

Mailing Address 1796 Highway 25

City

Guthrie Center

State

IA

Zip Code

50115-8741

FEC ID number of contributing
federal political committee.

C

Name of Employer

Broker Dealer Financial Services Corp

Occupation

Investment Broker & Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 26 / 2016

Transaction ID : SA11AI.45134

Amount of Each Receipt this Period

289.00

Contribution

Full Name (Last, First, Middle Initial)

B. Mr Nicholas Zwileneff

Mailing Address 2 Falling Water Ct

City

Fredericksburg

State

VA

Zip Code

22405-2787

FEC ID number of contributing
federal political committee.

C

Name of Employer

Department of Labor

Occupation

Economist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 14 / 2016

Transaction ID : SA11AI.45182

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

539.00

TOTAL This Period (last page this line number only)..... ►

70465.34

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. American National Insurance Co.

Date of Disbursement

Transaction ID : SB21B.45193

001

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

886.16

B. BB&T - Branch Banking & Trust

Date of Disbursement



Transaction ID : SB21B.45195

001

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

294.28

C. BB&T Loan Processing Center

Date of Disbursement

Transaction ID : SB21B.45196

001

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Amount of Each Disbursement this Period

2900.21

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

4080.65

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. BB&T Visa

Mailing Address P.O. BOX 580340

City Charlotte State NC Zip Code 28258-0340

Purpose of Disbursement
Credit Card Payment (See Attached Memos)

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 31 / 2016
Transaction ID : SB21B.45197

Amount of Each Disbursement this Period

5891.80

Full Name (Last, First, Middle Initial)

B. ADT Security Systems

Mailing Address PO Box 371878

City Pittsburgh State PA Zip Code 15250-7878

Purpose of Disbursement
Security System Monthly Fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 17 / 2016
Transaction ID : SB21B.45197.0

Amount of Each Disbursement this Period

52.21

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address PO Box 582820 - MD766

City Tulsa State OK Zip Code 74158-2820

Purpose of Disbursement
Travel-Air

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 17 / 2016
Transaction ID : SB21B.45197.1

Amount of Each Disbursement this Period

469.20

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5891.80

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Arizona Grand Resort

Mailing Address 8000 S. Arizona Grand Parkway

City Phoenix State AZ Zip Code 85044-0000

Purpose of Disbursement
Meeting Deposit

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 21 / 2016
Transaction ID : SB21B.45197.2

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Capitol Promotions, Inc.Mailing Address PO box 231
249 N. Kensington Ave

City Glenside State PA Zip Code 19038-0000

Purpose of Disbursement
Libertarian Party Political Materials

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 10 / 2016
Transaction ID : SB21B.45197.3

Amount of Each Disbursement this Period

305.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Clarix Technologies, Inc.

Mailing Address 1000 Pittsford Victor Road #21

City Pittsford State NY Zip Code 14534-0000

Purpose of Disbursement
Abode Connect Fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 06 / 2016
Transaction ID : SB21B.45197.4

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Custom Ink, Inc.

Mailing Address PO BOX 198399

City Atlanta State GA Zip Code 30384-8399

Purpose of Disbursement
Libertarian Party Political Materials

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 01 / 2016
Transaction ID : SB21B.45197.5

Amount of Each Disbursement this Period

1439.01

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Facebook, Inc.

Mailing Address 1601 S. California Ave

City Palo Alto State CA Zip Code 94304-0000

Purpose of Disbursement
Facebook Widget Ad Change

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 01 / 2016
Transaction ID : SB21B.45197.6

Amount of Each Disbursement this Period

10.61

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. GoDaddy.com, Inc.

Mailing Address 14455 N Hayden Rd # 226

City Scottsdale State AZ Zip Code 85260-6993

Purpose of Disbursement
Domain Renewals

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 21 / 2016
Transaction ID : SB21B.45197.7

Amount of Each Disbursement this Period

114.08

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 45 OF 73

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Hewlett Packard

Mailing Address 1501 Page Mill Road

City Palo Alto State CA Zip Code 94304-0000

Purpose of Disbursement
Software

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 01 2016
Transaction ID : SB21B.45197.8

Amount of Each Disbursement this Period

63.59

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Intuit Software

Mailing Address PO Box 30015

City Reno State NV Zip Code 89520-3015

Purpose of Disbursement
Accounting Software and Supplies

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 15 2016
Transaction ID : SB21B.45197.9

Amount of Each Disbursement this Period

253.58

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Lexis-Nexis t/a Accurant

Mailing Address P.O. Box 538358

City Atlanta State GA Zip Code 30353-8358

Purpose of Disbursement
Address-Phone Verification

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 06 2016
Transaction ID : SB21B.45197.10

Amount of Each Disbursement this Period

72.23

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Nationbuilder, Inc.

Mailing Address 520 S. Grand Ave 2nd Floor

City	State	Zip Code
Los Angeles	CA	90071-0000

Purpose of Disbursement
Monthly Software Fee

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.45197.14

Amount of Each Disbursement this Period

29.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Postmaster - Alexandria BRM

Mailing Address 2226 Duke St.

City	State	Zip Code
Alexandria	VA	22314-0000

Purpose of Disbursement	Postage

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.45197.15

Amount of Each Disbursement this Period

11.30

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Postmaster - Alexandria BRM

Mailing Address 2226 Duke St.

City	State	Zip Code
Alexandria	VA	22314-0000

Purpose of Disbursement	Postage

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

The image shows three 3x3 grids, each representing a number using the letters M, D, and Y. The first grid shows '01' with 'M' in the top-left and top-right positions. The second grid shows '21' with 'D' in the top-left and top-right positions. The third grid shows '2016' with 'Y' in the top-left, top-right, middle-right, and bottom-right positions. The grids are separated by slashes.

Transaction ID : SB21B.45197.16

Amount of Each Disbursement this Period

64.64

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Public Storage, Inc.

Mailing Address 370 Holland Lane

City Alexandria State VA Zip Code 22314-3418

Purpose of Disbursement
Storage Rent

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 04 / 2016
Transaction ID : SB21B.45197.17

Amount of Each Disbursement this Period

429.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Uline, Inc.

Mailing Address 2200 S. Lakeside Dr.

City Waukegan State IL Zip Code 60085-0000

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 06 / 2016
Transaction ID : SB21B.45197.18

Amount of Each Disbursement this Period

266.90

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UStream.TV

Mailing Address 410 Townsend St

City San Francisco State CA Zip Code 94107-0000

Purpose of Disbursement
Video Streaming Fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 11 / 2016
Transaction ID : SB21B.45197.19

Amount of Each Disbursement this Period

79.20

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 49 OF 73

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Website Movers International LLC

Mailing Address 88 Kercheval Ave, Suite 100

City State Zip Code
Grosse Pointe Farms MI 48236-0000
Purpose of Disbursement
Website Maintenance

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 14 2016
Transaction ID : SB21B.45197.20

Amount of Each Disbursement this Period

39.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Robert C. BenedictMailing Address 850 John Carlyle St
Apt 151
City State Zip Code
Alexandria VA 22314-6857
Purpose of Disbursement
Employee Net Pay

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 13 2016
Transaction ID : SB21B.45222

Amount of Each Disbursement this Period

2245.16

Full Name (Last, First, Middle Initial)

C. Robert C. BenedictMailing Address 850 John Carlyle St
Apt 151
City State Zip Code
Alexandria VA 22314-6857
Purpose of Disbursement
Employee Net Pay

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 27 2016
Transaction ID : SB21B.45223

Amount of Each Disbursement this Period

2245.16

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4490.32

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 50 OF 73

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Bigeye Direct, Inc.

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	1				1	3						2	0	1	6

Mailing Address PO Box 710865

City	State	Zip Code
Oak Hill	VA	20171-0865

Transaction ID : SB21B.45224Purpose of Disbursement
Non Candidate Party Printing and Mailing Service

003

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1775.41

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. Broadview Networks, Inc.

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	1				1	3						2	0	1	6

Mailing Address PO Box 9242

City	State	Zip Code
Uniondale	NY	11555-9242

Transaction ID : SB21B.45225Purpose of Disbursement
Phone system & usage

001

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

990.75

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. Andrew Burns

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	1				0	6						2	0	1	6

Mailing Address 2811 Xerxes Ave S Apt 15

City	State	Zip Code
Minneapolis	MN	55416-0000

Transaction ID : SB21B.45226Purpose of Disbursement
Affiliate Support Services

001

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1400.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4166.16

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Andrew Burns

Mailing Address 2811 Xerxes Ave S Apt 15

City Minneapolis State MN Zip Code 55416-0000

Purpose of Disbursement
Affiliate Support Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 12 / 2016
Transaction ID : SB21B.45227

Amount of Each Disbursement this Period

1400.00

Full Name (Last, First, Middle Initial)

B. Andrew Burns

Mailing Address 2811 Xerxes Ave S Apt 15

City Minneapolis State MN Zip Code 55416-0000

Purpose of Disbursement
Affiliate Support Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 26 / 2016
Transaction ID : SB21B.45228

Amount of Each Disbursement this Period

1400.00

Full Name (Last, First, Middle Initial)

C. Andrew Burns

Mailing Address 2811 Xerxes Ave S Apt 15

City Minneapolis State MN Zip Code 55416-0000

Purpose of Disbursement
Reimbursed Expense see United Airlines Memo

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 26 / 2016
Transaction ID : SB21B.45229

Amount of Each Disbursement this Period

438.20

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3238.20

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. United Airlines

Mailing Address PO Box 86100

City Chicago State IL Zip Code 60666-0100

Purpose of Disbursement
Staff Travel - Air

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 26 2016
Transaction ID : SB21B.45229.0

Amount of Each Disbursement this Period

438.20

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. CareFirst BlueChoice, Inc.

Mailing Address PO Box 79749

City Baltimore State MD Zip Code 21279-0749

Purpose of Disbursement
Employee health and Dental

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 31 2016
Transaction ID : SB21B.45231

Amount of Each Disbursement this Period

3090.60

Full Name (Last, First, Middle Initial)

C. Eric D. Dixon

Mailing Address 2819 Fairhaven Ave #103

City Alexandria State VA Zip Code 22303-0000

Purpose of Disbursement
Admin Support & Web Consulting Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 12 2016
Transaction ID : SB21B.45236

Amount of Each Disbursement this Period

2141.25

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5231.85

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

Category/
Type

255.19

M M / D D / Y Y Y Y
01 08 2016

Category/
Type

1500.00

Category/
Type

1416.00

3171.19

TOTAL This Period (last page this line number only).....

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

Category/
Type

Age Group	Number of People
13-17	10
18-24	15
25-34	20
35-44	25
45-54	30
55-64	35
65-74	40
75-84	45
85-94	50
95-104	151.75

Category/
Type

Age Group	Percentage
18-24	151.75
25-34	~100
35-44	~80
45-54	~60
55-64	~40
65-74	~20
75-84	~10
85+	~5

Category/
Type

648.85

952.35

952.35

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

Category/
Type

648.85

Category/
Type

63.43

Category/
Type

1422.00

FEC Schedule B (Form 3X) Rev. 02/2003

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City St. Louis State MO Zip Code 63197-0030

Purpose of Disbursement
Medicare Company

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 26 2016
Transaction ID : SB21B.45249

Amount of Each Disbursement this Period

153.28

Full Name (Last, First, Middle Initial)

B. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City St. Louis State MO Zip Code 63197-0030

Purpose of Disbursement
Medicare Employee

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 26 2016
Transaction ID : SB21B.45250

Amount of Each Disbursement this Period

153.28

Full Name (Last, First, Middle Initial)

C. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City St. Louis State MO Zip Code 63197-0030

Purpose of Disbursement
Social Security Company

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 26 2016
Transaction ID : SB21B.45251

Amount of Each Disbursement this Period

655.40

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

961.96

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

00:

Category/
Type

655.40

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:



00

Category/
Type

1000.00

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

MM / DD / YYYY
01 / 13 / 2016

00-

Amount of Each Disbursement this Period

Category/
Type

1180.12

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

2835.52

FEC Schedule B (Form 3X) Rev. 02/2003

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Casey T. Hansen

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1				2	7		2	0	1	6		

Mailing Address 1445 Ogden St. NW
Apt #212

City Washington State DC Zip Code 20010-0000

Purpose of Disbursement
Employee Net Pay

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID : SB21B.45257

Amount of Each Disbursement this Period

1207.85

Full Name (Last, First, Middle Initial)

B. Carla A. Howell

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1				1	3		2	0	1	6		

Mailing Address 7740 Brandeis Way

City Springfield State VA Zip Code 22153-0000

Purpose of Disbursement
Employee Net Pay

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID : SB21B.45258

Amount of Each Disbursement this Period

2090.91

Full Name (Last, First, Middle Initial)

C. Carla A. Howell

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1				2	7		2	0	1	6		

Mailing Address 7740 Brandeis Way

City Springfield State VA Zip Code 22153-0000

Purpose of Disbursement
Employee Net Pay

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID : SB21B.45259

Amount of Each Disbursement this Period

2090.92

SUBTOTAL of Disbursements This Page (optional)..... ►

5389.68

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Robert Johnston

Mailing Address P. O. Box 35064

City Baltimore State MD Zip Code 21222-5064

Purpose of Disbursement
Contract labor admin services

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 12 2016
Transaction ID : SB21B.45260

Amount of Each Disbursement this Period

1566.00

Full Name (Last, First, Middle Initial)

B. Robert Johnston

Mailing Address P. O. Box 35064

City Baltimore State MD Zip Code 21222-5064

Purpose of Disbursement
Contract labor admin services

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 26 2016
Transaction ID : SB21B.45261

Amount of Each Disbursement this Period

1903.50

Full Name (Last, First, Middle Initial)

C. Konica Minolta Premier

Mailing Address PO Box 41602

City Philadelphia State PA Zip Code 19101-1602

Purpose of Disbursement
Copier Lease

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 13 2016
Transaction ID : SB21B.45262

Amount of Each Disbursement this Period

565.87

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4035.37

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Prof. Robert Steven Kraus

Mailing Address 2500 N Van Dorn St Apt 1608

City	State	Zip Code
Alexandria	VA	22302-1629

Purpose of Disbursement	Employee Net Pay

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

Transaction ID : SB21B.45263

Amount of Each Disbursement this Period

1561.75

Full Name (Last, First, Middle Initial)

B. Prof. Robert Steven Kraus

Mailing Address 2500 N Van Dorn St Apt 1608

City	State	Zip Code
Alexandria	VA	22302-1629

Purpose of Disbursement	Employee Net Pay

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.45264

Amount of Each Disbursement this Period

1561.75

Full Name (Last, First, Middle Initial)

C. Libertarian Party Oklahoma

Mailing Address c/of Tina Kelly
620 Reynolds St.

City	State	Zip Code
Edmond	OK	73013-0000

Purpose of Disbursement Ballot Access Petitioning

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

The image shows three 3x3 grids, each representing a number. The first grid shows '01' with 'M' in the top-left and top-right cells. The second grid shows '05' with 'D' in the top-left and top-right cells. The third grid shows '2016' with 'Y' in the top-left, top-right, middle-right, and bottom-right cells.

Transaction ID : SB21B.45267

Amount of Each Disbursement this Period

4277.50

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

7401.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Libertarian Party OklahomaMailing Address c/of Tina Kelly
620 Reynolds St.

City Edmond State OK Zip Code 73013-0000

Purpose of Disbursement
Ballot Access Petitioning

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 08 2016**Transaction ID : SB21B.45268**

Amount of Each Disbursement this Period

2605.00

Full Name (Last, First, Middle Initial)

B. Libertarian Party OklahomaMailing Address c/of Tina Kelly
620 Reynolds St.

City Edmond State OK Zip Code 73013-0000

Purpose of Disbursement
Ballot Access Petitioning

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 09 2016**Transaction ID : SB21B.45269**

Amount of Each Disbursement this Period

1705.00

Full Name (Last, First, Middle Initial)

C. Libertarian Party OklahomaMailing Address c/of Tina Kelly
620 Reynolds St.

City Edmond State OK Zip Code 73013-0000

Purpose of Disbursement
Ballot Access Petitioning

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 11 2016**Transaction ID : SB21B.45270**

Amount of Each Disbursement this Period

792.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5102.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Libertarian Party OklahomaMailing Address c/of Tina Kelly
620 Reynolds St.

City Edmond State OK Zip Code 73013-0000

Purpose of Disbursement
Ballot Access Petitioning

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
01 / 12 / 2016**Transaction ID : SB21B.45271**

Amount of Each Disbursement this Period

3048.00

Full Name (Last, First, Middle Initial)

B. Libertarian Party OklahomaMailing Address c/of Tina Kelly
620 Reynolds St.

City Edmond State OK Zip Code 73013-0000

Purpose of Disbursement
Ballot Access Petitioning

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
01 / 12 / 2016**Transaction ID : SB21B.45272**

Amount of Each Disbursement this Period

890.00

Full Name (Last, First, Middle Initial)

C. Libertarian Party OklahomaMailing Address c/of Tina Kelly
620 Reynolds St.

City Edmond State OK Zip Code 73013-0000

Purpose of Disbursement
Ballot Access Petitioning

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
01 / 14 / 2016**Transaction ID : SB21B.45273**

Amount of Each Disbursement this Period

770.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4708.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Libertarian Party OklahomaMailing Address c/of Tina Kelly
620 Reynolds St.

City Edmond State OK Zip Code 73013-0000

Purpose of Disbursement
Ballot Access Petitioning

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
01 / 19 / 2016**Transaction ID : SB21B.45274**

Amount of Each Disbursement this Period

5670.00

Full Name (Last, First, Middle Initial)

B. Libertarian Party OklahomaMailing Address c/of Tina Kelly
620 Reynolds St.

City Edmond State OK Zip Code 73013-0000

Purpose of Disbursement
Ballot Access Petitioning

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
01 / 20 / 2016**Transaction ID : SB21B.45275**

Amount of Each Disbursement this Period

3529.50

Full Name (Last, First, Middle Initial)

C. Libertarian Party OklahomaMailing Address c/of Tina Kelly
620 Reynolds St.

City Edmond State OK Zip Code 73013-0000

Purpose of Disbursement
Ballot Access Petitioning

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
01 / 22 / 2016**Transaction ID : SB21B.45276**

Amount of Each Disbursement this Period

2657.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

11856.50

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Libertarian Party OklahomaMailing Address c/of Tina Kelly
620 Reynolds St.

City Edmond State OK Zip Code 73013-0000

Purpose of Disbursement
Ballot Access Petitioning

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
01 / 23 / 2016**Transaction ID : SB21B.45277**

Amount of Each Disbursement this Period

99.50

Full Name (Last, First, Middle Initial)

B. Denise Luckey

Mailing Address 1367 Hickory Hills Dr.

City Murchison State TX Zip Code 75778-0000

Purpose of Disbursement
Administrative Support & Graphic Design

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
01 / 05 / 2016**Transaction ID : SB21B.45278**

Amount of Each Disbursement this Period

1328.13

Full Name (Last, First, Middle Initial)

C. Denise Luckey

Mailing Address 1367 Hickory Hills Dr.

City Murchison State TX Zip Code 75778-0000

Purpose of Disbursement
Administrative Support & Graphic Design

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
01 / 20 / 2016**Transaction ID : SB21B.45279**

Amount of Each Disbursement this Period

1381.25

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2808.88

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Merchant Services

00:

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

1305.02

B. Miller's Office Products, Inc.

M M / D D / Y Y Y Y
01 13 2016

00

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

288.65

C. PayPal Merchant Services

00'

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

1374.56

2968.23

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

00:

Category/
Type

232.07

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

00

Category/
Type

2075 1

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

00'

Category/
Type

21.44

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

[MEMO ITEM]

3307.21

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<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

00:

Category/
Type

[MEMO ITEM]

00

Category/
Type

[MEMO ITEM]

00-

Category/
Type

[MEMO ITEM]

0.00

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Rackspace US Inc.

Mailing Address 9725 Datapoint Dr. #100

City San Antonio State TX Zip Code 78229-0000

Purpose of Disbursement
Website Hosting Service

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 07 / 2016
Transaction ID : SB21B.45285.4

Amount of Each Disbursement this Period

712.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Security Metrics, Inc.

Mailing Address 275 W. 1600 N

City Orem State UT Zip Code 84057-0000

Purpose of Disbursement
PCI Policy

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 13 / 2016
Transaction ID : SB21B.45285.5

Amount of Each Disbursement this Period

269.99

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. SoftLayer Technologies, Inc.

Mailing Address 4849 Alpha Road,

City Dallas State TX Zip Code 75244-0000

Purpose of Disbursement
Email Server Hosting Expense

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 19 / 2016
Transaction ID : SB21B.45285.6

Amount of Each Disbursement this Period

514.00

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

[MEMO ITEM]

[MEMO ITEM]

[MEMO ITEM]

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

State: District:

MM / DD / YYYY

16.25

State: District:

295.00

State: District:

1011.25

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

2978.81

251.67

388.50

3618.98

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

LIBERTARIAN NATIONAL COMMITTEE, INC.



52.85

462.00

93921.98